Type a Plus sign (+) inside this b	, ox →				WEN	MM SB/01 (4-99)			
DECLARATION FO		Attorney Docket Num	nber	50005-20					
DESIGN PATENT APPLICATION (37 CFR 1.63)		First Named Inventor	r	SHEPARD, CI	hester L.				
(6. 6			COMF	PLETE IF KN	OWN				
Declaration	Declaration	Application Number	T						
Submitted	Submitted Submitted after		+						
With Initial Filing OR	Initial Filing (surcharge 37 CFR	Filing Date Group Art Unit							
	1.16 (e) required)	Examiner Name	1						
As a below named inventor, I hereby declare that:									
My residence, post office addre	ess, and citizenship are as	s stated below next to my na	ame.						
I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
	GLASS PROCESSING METHOD AND DEVICE								
	(Ti	itle of the Invention)				·			
the specification of which						!			
37					\neg				
is attached hereto	OR wa	as filed on (MM/DD/YYYY)		·	as Uni	ited States			
Application Number	and wa	as amended on (MM/DD/YY	rYY)	J.,	(if appli	icable).			
Intereby state that I have reviewed and understand the contents of the above-identified specification, including the claim, as amended by any amendment specifically referred to above.									
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hereby claim foreign priority benefits under 35 U.S.C. 119 (a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country Fo	oreign Filing Date C (MM/DD/YYYY)	Check Or Not	nly If Priority Claimed	Certified Cop	oy Attached? NO			
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			L						
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Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below. Application Number(s) Filing Date (MM/DD/YYYY)									
Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.									

[Page 1 of 3]

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DECLARATION – Utility or Design Patent Application								
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below, and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.								
U.S. P	U.S. Parent Application or PCT Parent Filing Date Parent Patent Number (MM/DD/YYYY) (if applicable)							
Number (MIN/DD/1111) (II applicable)								
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.								
	As a named inventor, I hereby appoint the following registered practioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:							
Customer Number OR Registered practioner(s) name/registration number listed below. Place Customer Number Bar Code Label Here								
	Name	Registration	n Number		Name)	Registration Number	
John M. Bradshaw 46,573				Stephen R.	. May	29,255		
X Additi	Additional registered practioner(s) named on supplemental Registered Practioner Information sheet PTO/SB/02C attached hereto.							
Direct all corresp	Direct all correspondence to : Customer Number Bar Code Label OR X Correspondence address below							
Name	Name John M. Bradshaw							
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City Indianapolis State IN					IN	ZIP	46204	
Country US Telephone 317/ 634-3456						Fax	317/637-7525	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
Name of Sole or First Inventor: X A petition has been filed for this unsigned inventor.								
	Given Name (first and n	niddle [if any])				Family Name or S	Surname	
Chester L. Shepard								
Inventor's Signa	nventor's Signature () Signature Date 2/01							

[Page 2 of 3]

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Country

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page ___ of ___

Name of Additional Joint Inventor, if any: A petition has been filed for the						nis unsigned inventor			
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Inventor's Signature							Date		
Residence: City State			Country Citizenship				Citizenship		
Mailing Address									
Mailing Address									
City	State			ZIP		Co	ountry		

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DECLARATION

Registered Practitioner Information (Supplemental Sheet)

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J. Andrew Lowes	40,706		
Charles J. Meyer	41,996		
Matthew R. Schantz	40,800		
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Scott J. Stevens	29,446		
James B. Myers	42,021		
C. Amy Ng Smith	42,931		
Charles P. Schmal	45,082		!
Edward E. Sowers	36,015		
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